



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2756

|                                    |   |                     |                               |   |
|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>10/786,721 | <b>FILING OR 371(c) DATE</b><br>02/24/2004<br><b>RULE</b> | <b>CLASS</b><br>398 | <b>GROUP ART UNIT</b><br>2613 | <b>ATTORNEY DOCKET NO.</b><br>B-4664NP 621523-9 |
|------------------------------------|---|---------------------|-------------------------------|---|

## APPLICANTS

Daniel Yap, Newbury Park, CA; *DY*

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/487,534 07/14/2003 *DY*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

05/15/2004

|   |                               |                            |                           |                                |
|---|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>6 | <b>TOTAL CLAIMS</b><br>37 | <b>INDEPENDENT CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                            |                           |                                |
| Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature  | Initials                      |                            |                           |                                |

## ADDRESS

36716

## TITLE

Multiple wavelength photonic oscillator

|                                    |   |  |
|------------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>1076 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                    |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                    |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                    |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
|                                    |   | <input type="checkbox"/> Other _____                           |
|                                    |   | <input type="checkbox"/> Credit                                |